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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL					re required	Application Numb		09/769,590		
FORM  No be used or all correspondence after initial filing)						Filing Date		01/25/01		
ho be used or all correspondence after initial filing)						First Named Inver	ntor	Edmund W. Brown		
\$				:	Group Art Unit	-	3683			
PATEN	VI & TAP					Examiner Name		M. C. Graham		
· · · · · · ·	Total Numb	er of	Pages in This Sub	mission		Attorney Docket Nu	umber	328.002		
				ENCLO	SURES	(check all that app	oly)			
X	Fee Transmit	tal F	orm			nent Papers Application)		After Allowance Communication to Group		
	Fee At	tach	ed		Drawing	· · ·   r		Appeal Communication to Board of Appeals and Interferences		
X	Amendment /	/ Rep	ily		Licensir	ng-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
	X After F	inal			Petition			Proprietor Information		
	Affida	/its/d	eclaration(s)			to Convert to a nal Application	Status Letter			
	Extension of	Time	Request		Power o	f Attorney, Revocation of Correspondence		other Enclosure(s) (elease identify below):		
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	Response to Missing Parts/									
Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53					·					
	under	37 (1	FK 1.32 01 1.33							
			SIGNATI	JRE OF	APPLIC	CANT, ATTORNEY,	OR AG	ENT		
Firm or		Pet	er C. Stomma, R	eg. No.	36,020					
Individual name Boyle Fredrickson Newholm St				Stein &	Gratz, S.C.					
250 East Wisconsin Avenue, Suite 1						1030				
Milwaukee, WI-53202										
Signature										
Date 9/26/03							_			
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Type or printed name Christine Kierzek							-			
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١		Complete if Known
	Application Number	09/769,590
	Filing Date	01/25/01
First Named Inventor		Edmund W. Brown
	Examiner Name	M.C. Graham
4	Group Art Unit	3683
1	Attorney Docket No.	328.002

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METHOD OF PAYMENT (check all that apply)								FEE CALCULATION (continued)						
Check Credit card Money Other None							3. Al	3. ADDITIONAL FEES						
					See 37 CFR 1.27		Large Entity   Small Entity				<b>^</b>			
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Code	(\$)	Code	( <b>\$)</b> 370	Hillian Glina	Fee Paid	'n	128	1,960	228	980	Extension for reply within fifth month	$\neg$		
101	740 330	201 206	165	Utility filing		<b>┤</b> 【	119	320	219	160	Notice of Appeal	$\neg$		
106	510	207	255	Design filing		<b>∃</b> [	120	320	220	160	Filing a brief in support of an appeal	$\neg$		
107				Plant filing t		վ I	121	280	221	140	Request for oral hearing	$\neg$		
108	740	208	370	Reissue filir		<b>Ⅎ</b> ∦	138	1,510	138	1,510	Petition to institute a public use proceeding	$\neg$		
114	160	214	80	Provisional f	illing lee [	┙┃	140	110	240	55	Petition to revive – unavoidable			
ĺ	SUBTOTAL (1) (\$)						141	1,280	241	640	Petition to revive – unintentional			
2. EX	TRA C	LAIM			ITY AND REISSU	JE	142	1,280	242	640	Utility issue fee (or reissue)	$\neg$		
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Total Cl	oime [		₌ \   =	ra Claims X	below Fee P	alu	144	620	244	310	Plant issue fee	$\neg$		
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Claims	_ L		_ L			$\dashv$		50	123	50	Processing fee under 37 CFR 1.17(q)	$\dashv$		
Multiple	Depend	lent					123			-		$\dashv$		
Large E	Entity	Small	Entity	_			126	180	126	180	Submission of Information Disclosure Stmt	$\dashv$		
Fee_	Fee	Fee	Fee	Fe	ee Description		581	40	581	40	Recording each patent assignment per property (times number of properties)	1		
Code 103	( <b>\$)</b> 18	Code 203	<b>(\$)</b> 9	Claims in e			146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	1		
102	84	202	42	Independen	nt claims in excess o	f 3	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))			
104	280	204	140	Multiple dep	endent daim, if not p	aid	179	740	279	370	Request for Continued Examination (RCE)			
109	84	209	42	**Reissue i	ndependent claims	- [	169	900	169	900	Request for expedited examination of a design application			
110	18	210	9	**Reissue c	nal patent claims in excess of 2	20			I		or a design approach	$\neg$		
',			_		original patent	7 <b> </b>	Other fee (specify)					$\dashv$		
** or number previously paid, if greater; For Reissues, see above									••		SUBTOTAL (3) (\$)	$\dashv$		
							-Reduc	ed by Bas						
SUBMI	SUBMITTED BY								1		Complete (if applicable)			
Name (Print/Type) Poter C Stomma							Reg	gistration	No.	36.02	70 Telephone (414) 225-97	55		

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